

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>		1/27/00
O.I.P.E. CLASSIFIER			7-11-00
FORMALITY REVIEW		67503	10-13-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/21/01
2	✓	✓	7/12/01
3	✓	✓	4/3/02
4	✓	✓	10/1/02
5	✓	✓	6/2/03
6	✓	✓	11/3/03
7	✓	✓	
8	✓	✓	
9	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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